

DEPARTMENT OF HEALTH SERVICES

1800 THIRD STREET, ROOM 100

P.O. BOX 942732

SACRAMENTO, CA 94234-7320

(916) 322-1086



CHIP Letter: 02-B

Date Issued: February 28, 2002

TO: CALIFORNIA HEALTHCARE FOR INDIGENTS PROGRAM COUNTIES
RECEIVING NET DISPROPORTIONATE SHARE HOSPITAL REVENUE

SUBJECT: FISCAL YEAR 2000-2001 NET DISPROPORTIONATE SHARE
HOSPITAL REVENUE TRUST/SPECIAL REVENUE FUND BALANCE
REPORT

In an effort to move in the direction of e-government, we are sending your *Fiscal Year (FY) 2000-2001, Net Disproportionate Share Hospital Revenue (NDSHR) Trust/Special Revenue Fund Balance Report* letter by e-mail and ask that you go to the Office of County Health Services' website to obtain all necessary report instructions and forms. The CHIP/RHS County letters can be viewed at <http://www.dhs.ca.gov/hisp/ochs/chsu/index.htm> in Microsoft Word/Excel or Adobe Acrobat.

The content of the instructions and forms remain the same as in previous years with the exception of the format and FY. To assist you in completing the forms, we have inserted general comments and formula driven cells in the [Excel file](#). These comments have been taken from the instructions and are indicated by a *red triangle* in the upper, right-hand corner of the cell. Once you have completed all necessary forms, please mail the report by April 15, 2002, to the following address:

Department of Health Services
Office of County Health Services
Attention: County Health Services Unit
1800 Third Street, Room 100
P.O. Box 942732
Sacramento, CA 94234-7320



Do your part to help California save energy. To learn more about saving energy, visit the following web site:

www.consumerenergycenter.org/flex/index.html

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Since all CHIP reports and documents require an original signature, we are unable to accept reports currently by e-mail. We hope to have this option available to your county in the future.

Thank you for your cooperation and patience as we implement these new changes. Should you experience any problems or have questions, please call your County Health Services Analyst at (916) 322-1086 for assistance.

Sincerely,

ORIGINAL SIGNED BY TERRY TRINIDAD

Terry Trinidad, Chief
County Health Services Unit

Enclosures

cc: George B. (Peter) Abbott, M.D., M.P.H.
Acting Deputy Director
Health Information and Strategic Planning
Department of Health Services
1800 Third Street, Room 100
P.O. Box 942732
Sacramento, CA 94234-7320

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Budget Consultant
Assembly Budget Committee
State Capitol, Room 6026
Sacramento, CA 95814

Ms. Eileen Eastman
Executive Secretary
California Conference of Local
Health Officers
Department of Health Services
714 P Street, Room 1292
Sacramento, CA 95814

cc: Ms. Kimberly Gates
Assistant Secretary
California Health and Human
Services Agency
1600 Ninth Street, Room 460
Sacramento, CA 95814

Ms. Angela Gilliard
Legislative Advocate
Western Center on Law and
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Sacramento, CA 95814

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Principal Program Budget Analyst
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Sacramento, CA 95814

Mr. Don Maddy
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Sacramento, CA 95814

Ms. Charleen Milburn
Managing Director
California Medical Association
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Sacramento, CA 95814

Mr. Santiago Munoz, Director
Finance Policy
California Association of Public
Hospitals and Health Systems
2000 Center Street, Suite 308
Berkeley, CA 94704

Mr. Dwight Nelsen
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Office of Legal Services
Department of Health Services
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Sacramento, CA 95814

Ms. Caitlin O'Halloran
Legislative Representative
Health and Human Services
California State Association of
Counties
1100 K Street, Suite 101
Sacramento, CA 95814

Mr. Bruce Pomer
Executive Director
Health Officers Association of
California
1100 11th Street, Suite 321
Sacramento, CA 95814

Ms. Judith Reigel
Executive Officer
County Health Executives
Association of California
1127 11th Street, Suite 309
Sacramento, CA 95814

Ms. Mickey Richie
Intergovernmental Liaison
Office of the Director
Department of Health Services
714 P Street, Room 1253
Sacramento, CA 95814

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cc: Mr. David Souleles
Chief Deputy Director
Office of the Director
Department of Health Services
714 P Street, Room 1253
Sacramento, CA 95814

Ms. Diane Van Maren
Senior Consultant
Senate Budget and Fiscal
Review Committee
State Capitol, Room 5019
Sacramento, CA 95814

Board of Supervisors Contacts

Auditor-Controller Contacts

Health Officer Contacts

SENATE BILL 855 NET DISPROPORTIONATE SHARE HOSPITAL REVENUES

ANNUAL TRUST/SPECIAL REVENUE FUND BALANCE REPORT

FISCAL YEAR 2000-01

COUNTY OF _____

INSTRUCTIONS
SENATE BILL 855 NET DISPROPORTIONATE SHARE HOSPITAL REVENUES (NDSHR)
ANNUAL TRUST/SPECIAL REVENUE FUND BALANCE REPORT
FISCAL YEAR 2000-01

The following instructions outline the steps required for completing each of the report's three parts: I.) Net Disproportionate Share Hospital Revenues; II.) Financial Statement; and, III.) Certification.

NOTE: Only counties with county hospitals are required to submit this report.

I. NET DISPROPORTIONATE SHARE HOSPITAL REVENUES (NDSHR)

- A. Enter the total FY 2000-01 Payment Adjustments received.
- B. Enter the total FY 2000-01 Intergovernmental Transfer.
- C. Subtract line A. from B. above, and enter the total NDSHR.

(The method of accounting used for reporting NDSHR must be the same method utilized by the county for all other revenues.)

II. FINANCIAL STATEMENT

A. BEGINNING BALANCE

Enter the fund's beginning balance. The beginning balance is the previous years' ending

B. INCOME

- 1. Enter the total NDSHR received for FY 2000-01. (See I.C. above).
- 2. Enter the total interest earned and posted to the fund in FY 2000-01.
- 3. Enter the total income by adding lines 1. and 2. above.

C. DISBURSEMENTS

- 1. Enter the amount disbursed for mental health services.
- 2. Enter the amount disbursed for capital outlay for health services.
- 3. Enter the amount disbursed for capital outlay for mental health services.
- 4. Enter the amount disbursed for AB 8 reportable health services.
- 5. Enter total disbursements by adding lines 1. - 4. above.

D. ENDING BALANCE

Beginning Balance (II.A.) + Total Income (II.B.3.) - Total Disbursements (II.C.5.) = Ending Balance. The Ending Balance is the beginning balance for FY 2001-02.

III. CERTIFICATION

The report requires the county auditor controller's signature, certifying the report's accuracy and availability of supporting documentation for the State's review.

**SENATE BILL 855 NET DISPROPORTIONATE SHARE HOSPITAL REVENUES (NDSHR)
ANNUAL TRUST/SPECIAL REVENUE FUND BALANCE REPORT
FISCAL YEAR 2000-01**

COUNTY OF _____

I. NET DISPROPORTIONATE SHARE HOSPITAL REVENUES

A. Total Amount of the FY 2000-01 Payment Adjustments _____

B. Total Amount of the FY 2000-01 Intergovernmental Transfer _____

C. Total FY 2000-01 NDSHR (I.A. - I.B.) _____

II. FINANCIAL STATEMENT

A. BEGINNING BALANCE _____

B. INCOME

1. Total FY 2000-01 NDSHR _____

2. Total Interest Earned _____

3. Total Income (II.B.1. + II.B.2.) _____

C. DISBURSEMENTS

1. Funds Disbursed for Mental Health Services _____

2. Funds Disbursed for Capital Outlay for Health _____

3. Funds Disbursed for Capital Outlay for Mental Health _____

4. Funds Disbursed for Health Services _____

5. Total Disbursements (II.C.1. + II.C.2. + II.C.3. + II.C.4.) _____

D. ENDING BALANCE _____

(II.A. + II.B.3. - II.C.5.) _____

III. CERTIFICATION

I HEREBY CERTIFY THE ACCURACY OF THIS TRUST FUND BALANCE REPORT, AND THAT
SUPPORTING DOCUMENTATION IS AVAILABLE FOR STATE REVIEW.

AUDITOR CONTROLLER SIGNATURE: _____

DATE: _____ TELEPHONE NUMBER: _____